

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

| | | | |
|---|--|---|--|
| NAME OF COMMITTEE (In Full) Congressional Leadership Fund | | FEC IDENTIFICATION NUMBER ▼ C C00504530 | |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> | |

| | | | |
|--|-----------------------|--|---|
| Full Name of Payee Cold Spark Media | | Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">25</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">2016</div> | |
| Mailing Address 307 Fourth Ave Suite 290 | | Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">18308.56</div> | |
| City Pittsburgh | State PA | Zip Code 15222 | Transaction ID : 001 |
| Purpose of Expenditure Direct mail | Category/ Type 004 | Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">18</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">2016</div> | |
| Name of Federal Candidate Teachout, Zephyr, , , | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY |
| Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">3086441.77</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|--|-----------------------|--|---|
| Full Name of Payee Target Enterprises | | Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">25</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">2016</div> | |
| Mailing Address 15260 Ventura Blvd. Suite 1240 | | Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">450000.00</div> | |
| City Sherman Oaks | State CA | Zip Code 91403 | Transaction ID : 002 |
| Purpose of Expenditure Media placement | Category/ Type 004 | Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">21</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">2016</div> | |
| Name of Federal Candidate Teachout, Zephyr, , , | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY |
| Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">3536441.77</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | <div style="display: inline-block; border: 1px solid black; padding: 2px;">468308.56</div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | <div style="display: inline-block; border: 1px solid black; padding: 2px;"></div> |
| (c) TOTAL Independent Expenditures.....▶ | <div style="display: inline-block; border: 1px solid black; padding: 2px;"></div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Crosby, Caleb, , ,

[Electronically Filed]

Date

10

 /

26

 /

2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) Congressional Leadership Fund | | FEC IDENTIFICATION NUMBER ▼ C C00504530 |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY |

| | | |
|--|-----------------------------|--|
| Full Name of Payee Advoc8 | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2016 |
| Mailing Address 1342 Florida Avenue NW | | Amount 4700.00 |
| City Washington | State DC | Zip Code 20009 |
| Purpose of Expenditure Media production | Category/Type 004 | Transaction ID : 003 Date of Disbursement or Obligation MM / DD / YYYY 10 / 26 / 2016 |
| Name of Federal Candidate Teachout, Zephyr, , , | | <input type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 19 <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY |
| Calendar Year-To-Date Per Election for Office Sought 3541141.77 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|---------------|--|
| Full Name of Payee | | Date of Public Distribution/Dissemination MM / DD / YYYY |
| Mailing Address | | Amount |
| City | State | Zip Code |
| Purpose of Expenditure | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate | | <input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|---|------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 4700.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | 473008.56 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Crosby, Caleb, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 26 / 2016

Signature